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|---|----------------------------------|---|----------------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2008</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>   |                                  | Docket Number (Optional)<br>0425-1185PUS1 |                |
| Application Number  | 10/532,412-Conf. #9129           | Filed                                     | April 22, 2005 |
| For METHOD OF PRODUCING MACROLIDE COMPOUND  |                                  |   |                |
| Art Unit 1645   |                                  | Examiner S. K. S. Shannan                 |                |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |                                  |   |                |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |                                  |   |                |
| <input checked="" type="checkbox"/>   | One month (37 CFR 1.17(a)(1))    | Fee                                       | \$ 120.00      |
| <input type="checkbox"/>  | Two months (37 CFR 1.17(a)(2))   | Small Entity Fee                          | \$             |
| <input type="checkbox"/>  | Three months (37 CFR 1.17(a)(3)) | \$60                                      | \$             |
| <input type="checkbox"/>  | Four months (37 CFR 1.17(a)(4))  | \$230                                     | \$             |
| <input type="checkbox"/>  | Five months (37 CFR 1.17(a)(5))  | \$525                                     | \$             |
| <input type="checkbox"/>  |                                  | \$1050                                    | \$             |
| <input type="checkbox"/>  |                                  | \$1640                                    | \$             |
| <input type="checkbox"/>  |                                  | \$820                                     | \$             |
| <input type="checkbox"/>  |                                  | \$2230                                    | \$             |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.   |                                  |   |                |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |                                  |   |                |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |                                  |   |                |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.   |                                  |   |                |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> . I have enclosed a duplicate copy of this sheet. |                                  |   |                |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  |                                  |   |                |
| I am the <input type="checkbox"/> applicant/inventor.   |                                  |   |                |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  |                                  |   |                |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>32,181</u>  |                                  |   |                |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.   |                                  |   |                |
| Registration number if acting under 37 CFR 1.34 _____   |                                  |   |                |
| <u>R. C. Stewart # 21,066</u><br>Signature  |                                  | May 12, 2008<br>Date                      |                |
| Marc S. Weiner<br>Typed or printed name   |                                  | (703) 205-8000<br>Telephone Number        |                |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.                                 |                                  |   |                |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted.   |                                  |   |                |